

Provider Strategies to Increase HPV Vaccination Coverage

The following content contains excerpts taken from a commentary on “Recommending HPV Vaccine Successfully” by Anne Schuchat, MD, Director of the National Center for Immunization and Respiratory Diseases, Centers for Disease Control and Prevention (CDC) and from formative research conducted by the CDC.

1 Talk to parents, focus on cancer prevention and provide straightforward information.

- ▶ Research shows having a healthcare provider recommend or not recommend the vaccine is of the most important factors in parents’ decisions to vaccinate their child against HPV. Healthcare providers can help reduce and prevent needless cases of HPV infection by talking to parents about the importance of this vaccine. Parents of preteens and teenagers may be interested in having their child vaccinated against HPV, but before saying yes, they may need your reassurance that you feel strongly that their child should get this vaccine.
- ▶ Research suggests that there are some approaches that may work better than others. The way that you make the recommendation matters. One of the best ways to reach parents is to recommend HPV vaccine in the same way you recommend any other vaccine. Refer to the Tip Sheet for more information.
- ▶ Parents may be concerned about vaccine safety. Understanding that the side effects are minor and emphasizing the extensive research that vaccines must undergo can help parents feel reassured.
- ▶ Parents may also be concerned that the HPV vaccine will give their child permission or “license” to have sex. Multiple studies have shown that preteens and teens who receive this vaccine do not have sex any sooner than their peers who have not received the vaccine. Parents need to hear that from you. Sexuality is a sensitive and uncomfortable topic for many families, especially with their son or daughter present. Parents want to hear from you that HPV vaccine is about cancer prevention, not a license to engage in sexual activity.
- ▶ Welcome questions from parents. A question from a parent does not mean they are refusing or delaying. Taking the time to listen to parents’ questions helps you save time and give an effective response. Let patients know that you support HPV vaccination personally. Answer questions confidently and give just the answer to the question they are asking -- don’t give more information than the parents have asked for. CDC research shows that straightforward messages work with parents when discussing HPV vaccine—and are easy for you or your staff to deliver.

2 Use every opportunity to vaccinate your adolescent patients.

- ▶ Routinely recommend the vaccine for girls and boys at 11 to 12 years of age. *Continue to recommend throughout adolescence up until age 26 for those not yet vaccinated.*
- ▶ HPV vaccine can safely be given at the same time as the other recommended adolescent vaccines.
- ▶ Provide HPV vaccine during routine sports, or camp physicals.
- ▶ Review immunization records even at acute care visits.

- ▶ Encourage parents to keep accurate vaccination records and to review the immunization schedule.
- ▶ Implement system interventions. These depend on clinician commitment – determine what would work best for YOUR practice.
 - ✓ Schedule the appointment for the next dose BEFORE the parent leaves the clinic.
 - ✓ Use a reminder/recall system such as post cards, email, text messages or auto-dial phone calls.
 - ✓ Enroll in the Utah Statewide Immunization Information System (USIIS), the statewide registry that keeps track of children’s immunization records.
 - ✓ Enroll in the Utah Vaccines for Children (VFC) Program to get free vaccine for eligible children.
 - ✓ Contact the Utah Immunization Program for an immunization record assessment and get other strategies to increase vaccination coverage in your clinic.

3 Connect with other healthcare providers who routinely treat HPV-related cancers.

- ▶ Your particular practice may not readily see the benefits of HPV vaccination; i.e., reduced cervical cancer surgeries. Talk with your peers to get inside information on HPV-related cancers that may be useful in developing YOUR communication with patients.

4 Implement standing orders policies so that patients can receive vaccines without a physician examination or individual physician order.

HPV Fast Facts:

- ▶ HPV is so common that most sexually active adults become infected at some point in their lives.
 - HPV infection is most common in people in their teens and early 20s.
 - About 1% of sexually active men and women in the U.S. have genital warts at any given time.
- ▶ Cervical cancer is the most common HPV-associated cancer among women.
- ▶ Most people will never know that they have been infected.
- ▶ Intercourse is not necessary to become infected.
- ▶ Treatment of cervical precancer and cancer can lead to many complications for women of childbearing age, such as infertility, cervical incompetence and cervical stenosis; these can lead to perinatal mortality, preterm delivery and low birth weight.
 - These outcomes have a considerable impact – not only on the mothers and infants concerned – but also on the cost of neonatal intensive care.
- ▶ Vaccine Impact – National Health and Nutrition Examination Survey (NHANES)
 - In 14-19 year olds, vaccine-type HPV prevalence decreased 56 percent, from 11.5 percent in 2003-2006 to 5.1 percent in 2007-2010.
 - The research showed that vaccine effectiveness for prevention of infection was an estimated 82 percent.